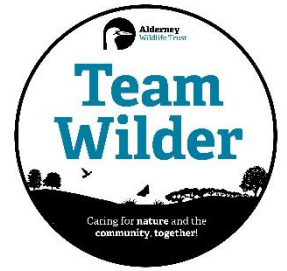


Forest School Registration Form



Full Name of child: _____

Date of birth: _____

Parent/Carer name (emergency contact): _____

Contact Telephone: _____

2nd contact in case of emergency: _____

E-mail: _____

Allergies: _____

Prescribed medication required on site: _____

Photo consent (for social media, Youth Commission reporting & literature use): _____

Dietary requirements: _____

Vegetarian / Vegan: _____

Any other relevant information: _____

I confirm I would like my child to take part in the 6 day woodland programme with Alderney Wildlife Trust. It is my responsibility to ensure my child has the appropriate kit with them (see kit list) to enable them to safely take part in all activities, as well as notify AWT of any medical or dietary requirements ahead of time.

Name: _____ Relationship to child: _____

Signature: _____ Date: _____

Note: One form per child required.